



Application for Building Permit

Contractor Information

License No.: _____
Company Name: _____
Address: _____
City: _____ State: _____ Zip: _____
Phone No.: (____) _____ Fax No. (____) _____
Email Address: _____
Signature: _____
Print Name: _____

Owner Information

Name: _____
Address: _____
City: _____ State: _____ Zip: _____
Phone No.: (____) _____ Fax No. (____) _____
Email Address: _____
Signature: _____
Print name: _____
Agent: _____
Print Name: _____

Description of Work: _____

Location of Work

Tax Map No.: _____
Street Address: _____
City: _____ State: _____ Zip: _____
Zone: _____ Subdivision: _____

(For Commercial Projects Only)

Site Plan No. _____ Date Approved: _____

Mechanic's Lien Agent

Name: _____
Address: _____
City: _____ State: _____ Zip: _____
Phone No.: (____) _____ Fax No. (____) _____

Building Information

Stories ____ No. Rooms ____ No. Baths ____ No. Bath Fix. ____
No. Fireplaces ____ Type: _____
Exterior Finish: ☐vinyl ☐brick ☐wood ☐other _____
Interior Finish: ☐Gypsum wallboard ☐wood ☐other _____
Flooring: ☐carpet ☐wood ☐vinyl ☐other _____
Roofing: ☐asphalt-fiberglass ☐wood ☐other _____
Heat Type: ☐gas ☐heat pump ☐electric ☐other _____
Air Conditioning Type: ☐central ☐window ☐none
Estimated Construction Value: _____
(Do not include Lot \$)

Floor Area (sq.ft.): _____
(Do not include Basement, Garage, and Deck/Porch)
Deck (sq.ft.): _____
Porch (sq.ft.): _____
Basement Area (sq.ft.): _____
Garage Area (sq.ft.): _____
Total Area (sq.ft.): _____
☐Septic ☐Public Sewer ☐Grinder Pump ☐Well
☐Public H₂O

OFFICE USE ONLY

Special Flood Hazard Area: Yes ☐ No ☐ Zone _____

Lot Width: _____	Improvement Code: _____	Notes: _____ _____ _____ _____ _____ _____ _____ _____ _____ _____
Lot Depth: _____	Structure Used As: _____	
Front Property Line: _____	Occupancy Class: _____	
Right Property Line: _____	Occupancy Load: _____	
Left Property Line: _____	Type Construction: _____	
Rear Property Line: _____	Zoning Approved: _____	
PERMIT NO.: _____	Zoning Disapproved: _____	
LINE NO.: _____	Plan Approved: _____	
Date/Time In: _____	Plan Disapproved: _____	
Date Plan Reviewed: _____	PLAN REVIEW FEE: _____	
	PERMIT FEE: _____	